

**FEC
FORM 3X****REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

Office Use Only

1. NAME OF
COMMITTEE (in full)**USE FEC MAILING LABEL
OR TYPE OR PRINT**Example: If typing, type
over the lines

Baxter Healthcare Political Action Committee

ADDRESS (number and street)

1501 K Street, NW

☒Check if different
than previously
reported. (ACC)

Washington

DC

20005

2. **FEC IDENTIFICATION NUMBER**

CITY

STATE

ZIP CODE

C00117838

3. IS THIS
REPORT☒NEW
(N)

OR

☐AMENDED
(A)4. **TYPE OF REPORT**

(Choose One)

(a) Quarterly Reports:

☐April 15
Quarterly Report(Q1)☐July 15
Quarterly Report(Q2)☐October 15
Quarterly Report(Q3)☐January 31
Quarterly Report(YE)☐July 31 Mid-Year
Report(Non-election
Year Only) (MY)☐Termination Report
(TER)(b) Monthly
Report
Due On:☐

Feb 20 (M2)

☐

May 20 (M5)

☐

Aug 20 (M8)

☐Nov 20 (M11)
(Non-Election
Year Only)☐

Mar 20 (M3)

☐

Jun 20 (M6)

☐

Sep 20 (M9)

☐Dec 20 (M12)
(Non-Election
Year Only)☐

Apr 20 (M4)

☒

Jul 20 (M7)

☐

Oct 20 (M10)

☐

Jan 31 (YE)

(c) 12-Day
PRE-Election
Report for the:☐

Primary (12P)

☐

General (12G)

☐

Runoff (12R)

☐

Convention (12C)

☐

Special (12G)

Election on

in the
State of(d) 30-Day
Post-Election
Report for the:☐

General (30G)

☐

Runoff (30R)

☐

Special (30S)

Election on

in the
State of

5. Covering Period

06

01

2007

through

06

30

2007

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer

Sarah Creviston

Signature of Treasurer

Electronically Filed by Sarah Creviston

Date

07

19

2007

NOTE : Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g.

Office
Use
Only**FEC FORM 3X**
(Rev. 02/2003)

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

Baxter Healthcare Political Action Committee

Report Covering the Period:

From:

M	M		D	D		Y	Y	Y	Y
0	6		0	1		2	0	0	7

To:

M	M		D	D		Y	Y	Y	Y
0	6		3	0		2	0	0	7

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1 2007		43802.52
(b) Cash on Hand at Beginning of Reporting Period	70202.10	
(c) Total Receipts (from Line 19)	12598.35	58997.93
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	82800.45	102800.45
7. Total Disbursements (from Line 31)	20000.00	40000.00
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	62800.45	62800.45
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D)	0.00	

☒ This Committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE OF RECEIPTS

FEC Form 3X (Rev. 02/2003)

Page 3

Write or Type Committee Name

Baxter Healthcare Political Action Committee

Report Covering the Period:

From:

M	M	D	D	Y	Y	Y	Y
0	6	0	1	2	0	0	7

To:

M	M	D	D	Y	Y	Y	Y
0	6	3	0	2	0	0	7

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees	12015.32	50078.15
(i) Itemized (use Schedule A)		
(ii) Unitemized	583.03	8919.78
(iii) TOTAL (add Lines 11(a)(i) and (ii) ➤	12598.35	58997.93
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b) and (c)) (Carry Totals to Line 33, page 5) ➤	12598.35	58997.93
12. Transfers From Affiliated/Other Party Committees	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.)	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	12598.35	58997.93
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	12598.35	58997.93

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. DISBURSEMENTS		COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:			
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		0.00	0.00
(i) Federal Share.....			
(ii) Non-Federal Share.....		0.00	0.00
(b) Other Federal Operating Expenditures.....		0.00	0.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)).....		0.00	0.00
22. Transfers to Affiliated/Other Party Committees.....		0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....		20000.00	40000.00
24. Independent Expenditure (use Schedule E)		0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....		0.00	0.00
26. Loan Repayments Made.....		0.00	0.00
27. Loans Made.....		0.00	0.00
28. Refunds of Contributions To:			
(a) Individuals/Persons Other Than Political Committees		0.00	0.00
(b) Political Party Committees		0.00	0.00
(c) Other Political Committees (such as PACs)		0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))		0.00	0.00
29. Other Disbursements.....		0.00	0.00
30. Federal Election Activity (2 U.S.C 431(20))			
(a) Shared Federal Election Activity (from Schedule H6)			
(i) Federal Share		0.00	0.00
(ii) "Levin" Share		0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds		0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....		0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..		20000.00	40000.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30(a)(ii) from Line 31).....		20000.00	40000.00

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3)	12598.35	58997.93
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	12598.35	58997.93
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	0.00	0.00
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	0.00	0.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 6 / 27

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Baxter Healthcare Political Action Committee

A. Full Name (Last, First, Middle Initial)
Joy A Amundson
Mailing Address 110 W. Onwentsia Road

City State Zip Code
Lake Forest IL 60045

FEC ID number of contributing
federal political committee.

C

Name of Employer
Baxter Healthcare Corpora-
tion

Occupation
CVP, Pres BioScience

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2600.79

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 0 1 / 2 0 0 7

Transaction ID: 70719.C31740

Amount of Each Receipt this Period

606.93

Receipt

Payroll Deduction: (202.3-
1/Pay Period)

B. Full Name (Last, First, Middle Initial)
Robert H Armstrong
Mailing Address 133 Manchester Drive

City State Zip Code
Waukesha WI 53188

FEC ID number of contributing
federal political committee.

C

Name of Employer
Baxter Healthcare Corpora-
tion

Occupation
VP, R & D Medical Devices

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

650.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 0 1 / 2 0 0 7

Transaction ID: 70719.C31745

Amount of Each Receipt this Period

150.00

Receipt

Payroll Deduction: (50.00-
/Pay Period)

C. Full Name (Last, First, Middle Initial)
Donald Baker
Mailing Address 286 Whitworth

City State Zip Code
Thousand Oaks CA 91360

FEC ID number of contributing
federal political committee.

C

Name of Employer
Baxter Healthcare Corpora-
tion

Occupation
VP II, Quality

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

808.75

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 0 1 / 2 0 0 7

Transaction ID: 70719.C31765

Amount of Each Receipt this Period

190.83

Receipt

Payroll Deduction: (63.61-
/Pay Period)

SUBTOTAL of Receipts This Page (optional)

947.76

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 7 / 27

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Baxter Healthcare Political Action Committee

A. Full Name (Last, First, Middle Initial)
Michael J Baughman
Mailing Address 5343 N Lakewood Avenue

City State Zip Code
Chicago IL 60640

FEC ID number of contributing
federal political committee.

C

Name of Employer
Baxter International Inc.

Occupation
CVP, Controller

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1300.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 0 1 / 2 0 0 7

Transaction ID: 70719.C31771

Amount of Each Receipt this Period

300.00

Receipt

Payroll Deduction: (100.0-
0/Pay Period)

B. Full Name (Last, First, Middle Initial)
Sebastian Bufalino
Mailing Address 1091 Pine Meadow Ct

City State Zip Code
Vernon Hills IL 60061

FEC ID number of contributing
federal political committee.

C

Name of Employer
Baxter International Inc.

Occupation
VP, Audit

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

617.54

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 0 1 / 2 0 0 7

Transaction ID: 70719.C31783

Amount of Each Receipt this Period

144.96

Receipt

Payroll Deduction: (48.32-
/Pay Period)

C. Full Name (Last, First, Middle Initial)
Donna Campagna
Mailing Address 30922 St Andrews Drive

City State Zip Code
Libertyville IL 60048

FEC ID number of contributing
federal political committee.

C

Name of Employer
Baxter Healthcare Corpora-
tion

Occupation
VP, Baxter IT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 0 1 / 2 0 0 7

Transaction ID: 70719.C31735

Amount of Each Receipt this Period

60.00

Receipt

Payroll Deduction: (20.00-
/Pay Period)

SUBTOTAL of Receipts This Page (optional)

504.96

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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FOR LINE NUMBER: PAGE 8 / 27

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Baxter Healthcare Political Action Committee

A. Full Name (Last, First, Middle Initial)
Edward Conrad

Mailing Address 113 S Waverly Pl

City State Zip Code
Mt Prospect IL 60056

FEC ID number of contributing
federal political committee.

C

Name of Employer
Baxter International Inc.

Occupation
Dir, Tax

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

785.58

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 0 1 / 2 0 0 7

Transaction ID: 70719.C31769

Amount of Each Receipt this Period

183.60

Receipt

Payroll Deduction: (61.20-
/Pay Period)

B. Full Name (Last, First, Middle Initial)
Sarah Creviston

Mailing Address 717 North Maple Ave.

City State Zip Code
Palatine IL 60067

FEC ID number of contributing
federal political committee.

C

Name of Employer
Baxter Healthcare Corpora-
tion

Occupation
VP, Government Affairs

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1168.87

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 0 1 / 2 0 0 7

Transaction ID: 70719.C31762

Amount of Each Receipt this Period

281.79

Receipt

Payroll Deduction: (93.93-
/Pay Period)

C. Full Name (Last, First, Middle Initial)
Margarita Cruz-casse

Mailing Address Violeta 153, San Francisco

City State Zip Code
San Juan PR 00927

FEC ID number of contributing
federal political committee.

C

Name of Employer
Baxter Healthcare Puerto
Rico

Occupation
Dir, Logistics

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

530.94

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 0 1 / 2 0 0 7

Transaction ID: 70719.C31789

Amount of Each Receipt this Period

124.74

Receipt

Payroll Deduction: (41.58-
/Pay Period)

SUBTOTAL of Receipts This Page (optional)

590.13

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Baxter Healthcare Political Action Committee

A. Full Name (Last, First, Middle Initial) Robert M Davis			Date of Receipt M M / D D / Y Y Y Y Y 0 6 / 0 1 / 2 0 0 7	
Mailing Address 21515 Hummingbird Court			Transaction ID: 70719.C31772	
City State Zip Code Kildeer IL 60047			Amount of Each Receipt this Period 455.19	
FEC ID number of contributing federal political committee. C			Receipt	
Name of Employer Baxter International Inc.		Occupation CVP, Chief Financial Officer		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1827.09		
B. Full Name (Last, First, Middle Initial) Paul Estrem			Date of Receipt M M / D D / Y Y Y Y Y 0 6 / 0 1 / 2 0 0 7	
Mailing Address 325 Clarewood Circle			Transaction ID: 70719.C31738	
City State Zip Code Grayslake IL 60030			Amount of Each Receipt this Period 150.00	
FEC ID number of contributing federal political committee. C			Receipt	
Name of Employer Baxter Healthcare Corpora- tion		Occupation VP II, Finance		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 650.00		
C. Full Name (Last, First, Middle Initial) Camille I Farhat			Date of Receipt M M / D D / Y Y Y Y Y 0 6 / 0 1 / 2 0 0 7	
Mailing Address 1052 Warrington Road			Transaction ID: 70719.C31747	
City State Zip Code Deerfield IL 60015			Amount of Each Receipt this Period 150.00	
FEC ID number of contributing federal political committee. C			Receipt	
Name of Employer Baxter Healthcare Corpora- tion		Occupation General Manager IV		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 650.00		

SUBTOTAL of Receipts This Page (optional)

755.19

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 10 / 27

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Baxter Healthcare Political Action Committee

A. Full Name (Last, First, Middle Initial) Kevin Freeman Mailing Address 20982 Buffalo Run City State Zip Code Kildeer IL 60047 FEC ID number of contributing federal political committee. C Name of Employer Baxter Healthcare Corporation Occupation VP I, Finance Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 799.83		Date of Receipt M M / D D / Y Y Y Y Y 0 6 / 0 1 / 2 0 0 7 Transaction ID: 70719.C31732 Amount of Each Receipt this Period 189.54 Receipt Payroll Deduction: (63.18- /Pay Period)
B. Full Name (Last, First, Middle Initial) Valery E Gallagher Mailing Address 400 Cross Arm Drive City State Zip Code Grayslake IL 60030 FEC ID number of contributing federal political committee. C Name of Employer Baxter Healthcare Corporation Occupation Dir, State Govt Affairs Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 805.18		Date of Receipt M M / D D / Y Y Y Y Y 0 6 / 0 1 / 2 0 0 7 Transaction ID: 70719.C31749 Amount of Each Receipt this Period 190.80 Receipt Payroll Deduction: (63.60- /Pay Period)
C. Full Name (Last, First, Middle Initial) James Gatling Mailing Address 3704 Lindsay Ln City State Zip Code Crystal Lake IL 60014 FEC ID number of contributing federal political committee. C Name of Employer Baxter Healthcare Corporation Occupation CVP, Global Manufacturing Ops Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1861.51		Date of Receipt M M / D D / Y Y Y Y Y 0 6 / 0 1 / 2 0 0 7 Transaction ID: 70719.C31719 Amount of Each Receipt this Period 438.45 Receipt Payroll Deduction: (146.1- 5/Pay Period)
SUBTOTAL of Receipts This Page (optional) ▶		818.79
TOTAL This Period (last page this line number only) ▶		

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 11 / 27

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Baxter Healthcare Political Action Committee

Full Name (Last, First, Middle Initial)

A. John Greisch

Mailing Address 2636 Chesapeake Lane

City State Zip Code
 Northbrook IL 60062

FEC ID number of contributing federal political committee.

C

Name of Employer
Baxter International Inc.Occupation
CVP, President - International

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2936.14

Date of Receipt

M M / D D / Y Y Y Y
 0 6 / 0 1 / 2 0 0 7

Transaction ID: 70719.C31784

Amount of Each Receipt this Period

685.38

Receipt

Payroll Deduction: (228.4-
6/Pay Period)

Full Name (Last, First, Middle Initial)

B. Lawrence Guiheen

Mailing Address 1653 Vista Oaks Way

City State Zip Code
 Westlake Village CA 91361

FEC ID number of contributing federal political committee.

C

Name of Employer
Baxter Healthcare Corpora-
tionOccupation
President V

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

455.00

Date of Receipt

M M / D D / Y Y Y Y
 0 6 / 0 1 / 2 0 0 7

Transaction ID: 70719.C31711

Amount of Each Receipt this Period

105.00

Receipt

Payroll Deduction: (35.00-
/Pay Period)

Full Name (Last, First, Middle Initial)

C. Worth Holder Jr

Mailing Address 42 Jamestown Court

City State Zip Code
 Grayslake IL 60030

FEC ID number of contributing federal political committee.

C

Name of Employer
Baxter International Inc.Occupation
VP II, Business Development

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

568.13

Date of Receipt

M M / D D / Y Y Y Y
 0 6 / 0 1 / 2 0 0 7

Transaction ID: 70719.C31780

Amount of Each Receipt this Period

133.35

Receipt

Payroll Deduction: (44.45-
/Pay Period)

SUBTOTAL of Receipts This Page (optional)

923.73

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 12 / 27

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Baxter Healthcare Political Action Committee

A. Full Name (Last, First, Middle Initial) Irene Jakimcius Mailing Address 2208 Wesley Ave. City Evanston State IL Zip Code 60201 FEC ID number of contributing federal political committee. C Name of Employer Baxter International Inc. Occupation Assoc General Counsel Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 937.19			Date of Receipt MM / DD / YYYY 06 / 01 / 2007 Transaction ID: 70719.C31775 Amount of Each Receipt this Period 225.81 Receipt Payroll Deduction: (75.27- /Pay Period)
B. Full Name (Last, First, Middle Initial) James Kamienski Mailing Address 6312 N Keating City Chicago State IL Zip Code 60646 FEC ID number of contributing federal political committee. C Name of Employer Baxter Healthcare Corpora- tion Occupation VP II, Manufacturing Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 670.18			Date of Receipt MM / DD / YYYY 06 / 01 / 2007 Transaction ID: 70719.C31721 Amount of Each Receipt this Period 157.44 Receipt Payroll Deduction: (52.48- /Pay Period)
C. Full Name (Last, First, Middle Initial) Robert Keeley Mailing Address 22606 Bridle City Kildeer State IL Zip Code 60047 FEC ID number of contributing federal political committee. C Name of Employer Baxter Healthcare Corpora- tion Occupation VP II, Marketing Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 603.00			Date of Receipt MM / DD / YYYY 06 / 01 / 2007 Transaction ID: 70719.C31752 Amount of Each Receipt this Period 141.66 Receipt Payroll Deduction: (47.22- /Pay Period)

SUBTOTAL of Receipts This Page (optional)

524.91

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 13 / 27

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Baxter Healthcare Political Action Committee

A. Full Name (Last, First, Middle Initial)
Jane Kiernan
Mailing Address 525 W. Roscoe, #3W

City State Zip Code
Chicago IL 60657

FEC ID number of contributing federal political committee.

C

Name of Employer
Baxter Healthcare Corpora-
tionOccupation
General Manager III

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

520.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 0 1 / 2 0 0 7

Transaction ID: 70719.C31733

Amount of Each Receipt this Period

120.00

Receipt

Payroll Deduction: (40.00-
/Pay Period)

B. Full Name (Last, First, Middle Initial)
Marie G Kissel
Mailing Address 1 Baxter Pkwy c/o Gerald Lema

City State Zip Code
Deerfield IL 60015

FEC ID number of contributing federal political committee.

C

Name of Employer
Baxter World Trade Corpora-
tionOccupation
Dir, Fed Legislative Affairs

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

918.40

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 0 1 / 2 0 0 7

Transaction ID: 70719.C31785

Amount of Each Receipt this Period

215.58

Receipt

Payroll Deduction: (71.86-
/Pay Period)

C. Full Name (Last, First, Middle Initial)
Edward A Langan
Mailing Address 1605 Highland Avenue

City State Zip Code
Wilmette IL 60091

FEC ID number of contributing federal political committee.

C

Name of Employer
Baxter Healthcare Corpora-
tionOccupation
VP II, Sales

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

975.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 0 1 / 2 0 0 7

Transaction ID: 70719.C31709

Amount of Each Receipt this Period

225.00

Receipt

Payroll Deduction: (75.00-
/Pay Period)

SUBTOTAL of Receipts This Page (optional)

560.58

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Baxter Healthcare Political Action Committee

A. Full Name (Last, First, Middle Initial)

Susan R Lichtenstein

Mailing Address 1257 W Wrightwood Ave

City State Zip Code
 Chicago IL 60614

FEC ID number of contributing federal political committee.

C

Name of Employer
Baxter International Inc.Occupation
CVP, General Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2522.27

Date of Receipt

M M / D D / Y Y Y Y Y
 0 6 / 0 1 / 2 0 0 7

Transaction ID: 70719.C31773

Amount of Each Receipt this Period

588.45

Receipt

Payroll Deduction: (196.1-
5/Pay Period)

B. Full Name (Last, First, Middle Initial)

Raymond Linder Jr

Mailing Address 246 Montclair Road

City State Zip Code
 Vernon Hills IL 60061

FEC ID number of contributing federal political committee.

C

Name of Employer
Baxter Healthcare Corpora-
tionOccupation
VP II, HR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

261.17

Date of Receipt

M M / D D / Y Y Y Y Y
 0 6 / 0 1 / 2 0 0 7

Transaction ID: 70719.C31737

Amount of Each Receipt this Period

111.93

Receipt

Payroll Deduction: (37.31-
/Pay Period)

C. Full Name (Last, First, Middle Initial)

Ronald K Lloyd

Mailing Address 1694 Falling Star Ave.

City State Zip Code
 Westlake Village CA 91362

FEC ID number of contributing federal political committee.

C

Name of Employer
Baxter Healthcare Corpora-
tionOccupation
General Manager IV

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

650.00

Date of Receipt

M M / D D / Y Y Y Y Y
 0 6 / 0 1 / 2 0 0 7

Transaction ID: 70719.C31736

Amount of Each Receipt this Period

150.00

Receipt

Payroll Deduction: (50.00-
/Pay Period)

SUBTOTAL of Receipts This Page (optional)

850.38

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Baxter Healthcare Political Action Committee

A. Full Name (Last, First, Middle Initial)
Matthew Lykken
Mailing Address 421 North Wheaton Ave

City State Zip Code
Wheaton IL 60187

FEC ID number of contributing federal political committee.

C

Name of Employer
Baxter International Inc.Occupation
VP, Tax

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

677.46

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 0 1 / 2 0 0 7

Transaction ID: 70719.C31782

Amount of Each Receipt this Period

159.30

Receipt

Payroll Deduction: (53.10-
/Pay Period)

B. Full Name (Last, First, Middle Initial)
Brian W Magerkurth
Mailing Address 4218 Third Street Lane NW

City State Zip Code
Hickory NC 28601

FEC ID number of contributing federal political committee.

C

Name of Employer
Baxter Healthcare Corpora-
tionOccupation
VP II, Global Supply Chain

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

733.92

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 0 1 / 2 0 0 7

Transaction ID: 70719.C31742

Amount of Each Receipt this Period

172.44

Receipt

Payroll Deduction: (57.48-
/Pay Period)

C. Full Name (Last, First, Middle Initial)
Teresita Martinez-santini
Mailing Address A-1 Atenas Street Repto Flamingo

City State Zip Code
Bayamon PR 00959

FEC ID number of contributing federal political committee.

C

Name of Employer
Baxter Healthcare Puerto
RicoOccupation
Dir, Quality

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

586.25

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 0 1 / 2 0 0 7

Transaction ID: 70719.C31788

Amount of Each Receipt this Period

137.31

Receipt

Payroll Deduction: (45.77-
/Pay Period)

SUBTOTAL of Receipts This Page (optional)

469.05

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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Detailed Summary Page

FOR LINE NUMBER: PAGE 16 / 27

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NAME OF COMMITTEE (In Full)

Baxter Healthcare Political Action Committee

Full Name (Last, First, Middle Initial)

A. Jeanne K Mason

Mailing Address 1 Baxter Parkway DF 1-2E

City State Zip Code
 Deerfield IL 60015

FEC ID number of contributing federal political committee.

C

Name of Employer
Baxter International Inc.Occupation
CVP, HR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2051.98

Date of Receipt

M M / D D / Y Y Y Y Y
 0 6 / 0 1 / 2 0 0 7

Transaction ID: 70719.C31778

Amount of Each Receipt this Period

478.86

Receipt

Payroll Deduction: (159.6-
2/Pay Period)

Full Name (Last, First, Middle Initial)

B. Kevin Mcculloch

Mailing Address 730 Greenwood Avenue

City State Zip Code
 Wilmette IL 60091

FEC ID number of contributing federal political committee.

C

Name of Employer
Baxter Healthcare Corpora-
tionOccupation
VP, Transition Services

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

764.81

Date of Receipt

M M / D D / Y Y Y Y Y
 0 6 / 0 1 / 2 0 0 7

Transaction ID: 70719.C31758

Amount of Each Receipt this Period

179.43

Receipt

Payroll Deduction: (59.81-
/Pay Period)

Full Name (Last, First, Middle Initial)

C. Bruce McGillivray

Mailing Address 151 Ridge Lane

City State Zip Code
 Lake Forest IL 60045

FEC ID number of contributing federal political committee.

C

Name of Employer
Baxter Healthcare Corpora-
tionOccupation
CVP, President Renal

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1923.13

Date of Receipt

M M / D D / Y Y Y Y Y
 0 6 / 0 1 / 2 0 0 7

Transaction ID: 70719.C31753

Amount of Each Receipt this Period

461.55

Receipt

Payroll Deduction: (153.8-
5/Pay Period)

SUBTOTAL of Receipts This Page (optional)

1119.84

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 17 / 27

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Baxter Healthcare Political Action Committee

A. Full Name (Last, First, Middle Initial)
 Frank Monteleone
 Mailing Address 4620 Forest Edge Lane

City State Zip Code
 Long Grove IL 60047

FEC ID number of contributing
federal political committee.

C

Name of Employer
 Baxter Healthcare Corpora-
 tion

Occupation
 Dir, IT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

715.81

Date of Receipt

M M / D D / Y Y Y Y
 0 6 / 0 1 / 2 0 0 7

Transaction ID: 70719.C31760

Amount of Each Receipt this Period

138.45

Receipt

Payroll Deduction: (46.15-
/Pay Period)

B. Full Name (Last, First, Middle Initial)
 Richard Moss
 Mailing Address 264 Leonard Wood South #207

City State Zip Code
 Highland Park IL 60035

FEC ID number of contributing
federal political committee.

C

Name of Employer
 Baxter Healthcare Corpora-
 tion

Occupation
 VP, Strategy & Bus Development

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
 0 6 / 0 1 / 2 0 0 7

Transaction ID: 70719.C31748

Amount of Each Receipt this Period

50.00

Receipt

Payroll Deduction: (50.00-
/Pay Period)

C. Full Name (Last, First, Middle Initial)
 Timothy Murphy
 Mailing Address 14601 N Somerset Circle

City State Zip Code
 Libertyville IL 60048

FEC ID number of contributing
federal political committee.

C

Name of Employer
 Baxter Healthcare Corpora-
 tion

Occupation
 Asst General Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

332.23

Date of Receipt

M M / D D / Y Y Y Y
 0 6 / 0 1 / 2 0 0 7

Transaction ID: 70719.C31759

Amount of Each Receipt this Period

79.59

Receipt

Payroll Deduction: (26.53-
/Pay Period)

SUBTOTAL of Receipts This Page (optional)

268.04

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Baxter Healthcare Political Action Committee

A. Full Name (Last, First, Middle Initial) Peter Omalley Mailing Address 791 Summit Avenue City State Zip Code Lake Forest IL 60045 FEC ID number of contributing federal political committee. C Name of Employer Baxter Healthcare Corporation Occupation VP/GM II Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 585.00		Date of Receipt M M / D D / Y Y Y Y 0 6 / 0 1 / 2 0 0 7 Transaction ID: 70719.C31764 Amount of Each Receipt this Period 135.00 Receipt Payroll Deduction: (45.00- /Pay Period)
B. Full Name (Last, First, Middle Initial) Robert L Parkinson Mailing Address 1332 Edgewood Lane City State Zip Code Northbrook IL 60062 FEC ID number of contributing federal political committee. C Name of Employer Baxter International Inc. Occupation Chairman & CEO Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 5000.00		Date of Receipt M M / D D / Y Y Y Y 0 6 / 0 1 / 2 0 0 7 Transaction ID: 70719.C31781 Amount of Each Receipt this Period 135.36 Receipt Payroll Deduction: (135.3- 6/Pay Period)
C. Full Name (Last, First, Middle Initial) Shannon W. Penberthy Mailing Address 3214 Porter Street, NW City State Zip Code Washington DC 20008 FEC ID number of contributing federal political committee. C Name of Employer Baxter Healthcare Corporation Occupation Dir, Fed Legislative Affairs Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1040.00		Date of Receipt M M / D D / Y Y Y Y 0 6 / 0 1 / 2 0 0 7 Transaction ID: 70719.C31743 Amount of Each Receipt this Period 240.00 Receipt Payroll Deduction: (80.00- /Pay Period)

SUBTOTAL of Receipts This Page (optional)

510.36

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

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NAME OF COMMITTEE (In Full)

Baxter Healthcare Political Action Committee

A. Full Name (Last, First, Middle Initial) Carla Pittman Mailing Address 5720 Shenandoah Avenue City State Zip Code Los Angeles CA 90056 FEC ID number of contributing federal political committee. C Name of Employer Baxter Healthcare Corpora- tion Occupation Sr Counsel Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 683.67			Date of Receipt MM / DD / YYYY 06 / 01 / 2007 Transaction ID: 70719.C31754 Amount of Each Receipt this Period 159.93 Receipt Payroll Deduction: (53.31- /Pay Period)
B. Full Name (Last, First, Middle Initial) Virginia Pringle Mailing Address 6655 Bobby Jones Ct City State Zip Code Palmetto FL 34221 FEC ID number of contributing federal political committee. C Name of Employer Baxter Healthcare Corpora- tion Occupation Mgr II, Operations Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 387.49			Date of Receipt MM / DD / YYYY 06 / 01 / 2007 Transaction ID: 70719.C31730 Amount of Each Receipt this Period 93.21 Receipt Payroll Deduction: (31.07- /Pay Period)
C. Full Name (Last, First, Middle Initial) Fredrick Ruda Mailing Address 1316 Ashland Ave. City State Zip Code Wilmette IL 60091 FEC ID number of contributing federal political committee. C Name of Employer Baxter Healthcare Corpora- tion Occupation Dir, Finance Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 220.00			Date of Receipt MM / DD / YYYY 06 / 01 / 2007 Transaction ID: 70719.C31739 Amount of Each Receipt this Period 60.00 Receipt Payroll Deduction: (20.00- /Pay Period)

SUBTOTAL of Receipts This Page (optional)

313.14

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Baxter Healthcare Political Action Committee

A. Full Name (Last, First, Middle Initial) Roibin Ryan		Date of Receipt M M / D D / Y Y Y Y Y 0 6 / 0 1 / 2 0 0 7
Mailing Address 1419 W Berteau		Transaction ID: 70719.C31776
City Chicago	State IL	Zip Code 60613
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 274.41
Name of Employer Baxter International Inc.	Occupation Deputy General Counsel	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1159.53	
		Receipt Payroll Deduction: (91.47- /Pay Period)

B. Full Name (Last, First, Middle Initial) James K Saccaro		Date of Receipt M M / D D / Y Y Y Y Y 0 6 / 0 1 / 2 0 0 7
Mailing Address Baxter Expatriate Admin PO Box 747		Transaction ID: 70719.C31787
City Deerfield	State IL	Zip Code 60015
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 149.82
Name of Employer Baxter World Trade Corporation	Occupation VP II, Finance	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 622.68	
		Receipt Payroll Deduction: (49.94- /Pay Period)

C. Full Name (Last, First, Middle Initial) David P Scharf		Date of Receipt M M / D D / Y Y Y Y Y 0 6 / 0 1 / 2 0 0 7
Mailing Address 931 Oak Street		Transaction ID: 70719.C31774
City Winnetka	State IL	Zip Code 60093
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 155.76
Name of Employer Baxter International Inc.	Occupation CVP, Corporate Secretary	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 644.60	
		Receipt Payroll Deduction: (51.92- /Pay Period)

SUBTOTAL of Receipts This Page (optional)

579.99

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Baxter Healthcare Political Action Committee

A. Full Name (Last, First, Middle Initial) Chandra Sekhar Mailing Address 1621 Mission Hills Rd Unit 211 City Northbrook State IL Zip Code 60062 FEC ID number of contributing federal political committee. C Name of Employer Baxter Healthcare Corporation Occupation VP II, Mfg Strategic Planning Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 679.36			Date of Receipt MM / DD / YYYY 06 / 01 / 2007 Transaction ID: 70719.C31710 Amount of Each Receipt this Period 159.96 Receipt Payroll Deduction: (53.32- /Pay Period)
B. Full Name (Last, First, Middle Initial) John P Shannon Mailing Address 432 Utley City Elmhurst State IL Zip Code 60126 FEC ID number of contributing federal political committee. C Name of Employer Baxter Healthcare Corporation Occupation VP I, Marketing Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 590.05			Date of Receipt MM / DD / YYYY 06 / 01 / 2007 Transaction ID: 70719.C31763 Amount of Each Receipt this Period 138.99 Receipt Payroll Deduction: (46.33- /Pay Period)
C. Full Name (Last, First, Middle Initial) Donald Sullivan Mailing Address 910 W Cypress Drive City Arlington Heights State IL Zip Code 60005 FEC ID number of contributing federal political committee. C Name of Employer Baxter International Inc. Occupation VP, Risk Management Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 520.00			Date of Receipt MM / DD / YYYY 06 / 01 / 2007 Transaction ID: 70719.C31767 Amount of Each Receipt this Period 120.00 Receipt Payroll Deduction: (40.00- /Pay Period)

SUBTOTAL of Receipts This Page (optional)

418.95

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Baxter Healthcare Political Action Committee

A. Full Name (Last, First, Middle Initial) Daniel Tasse Mailing Address 95 Spring Street City State Zip Code New Providence NJ 07974 FEC ID number of contributing federal political committee. C Name of Employer Baxter Healthcare Corporation Occupation General Manager IV Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1389.53			Date of Receipt MM / DD / YYYY 06 / 01 / 2007 Transaction ID: 70719.C31741 Amount of Each Receipt this Period 324.51 Receipt Payroll Deduction: (108.1- 7/Pay Period)
B. Full Name (Last, First, Middle Initial) Karenann Terrell Mailing Address 914 Queens Lanes City State Zip Code Glenview IL 60025 FEC ID number of contributing federal political committee. C Name of Employer Baxter International Inc. Occupation CVP, Chief Information Officer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 2500.03			Date of Receipt MM / DD / YYYY 06 / 01 / 2007 Transaction ID: 70719.C31777 Amount of Each Receipt this Period 576.93 Receipt Payroll Deduction: (192.3- 1/Pay Period)
C. Full Name (Last, First, Middle Initial) Onelia Vera-littrell Mailing Address 619 Oleander Drive City State Zip Code Hallandale FL 33009 FEC ID number of contributing federal political committee. C Name of Employer Baxter Healthcare Corporation Occupation Asst General Counsel Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1172.10			Date of Receipt MM / DD / YYYY 06 / 01 / 2007 Transaction ID: 70719.C31761 Amount of Each Receipt this Period 281.46 Receipt Payroll Deduction: (93.82- /Pay Period)

SUBTOTAL of Receipts This Page (optional)

1182.90

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Baxter Healthcare Political Action Committee

A. Full Name (Last, First, Middle Initial) Cheryl White Mailing Address 4069 Mayfield Street City State Zip Code Newbury Park CA 91320 FEC ID number of contributing federal political committee. C Name of Employer Baxter Healthcare Corporation Occupation CVP, Quality Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1711.58		Date of Receipt MM / DD / YYYY 06 / 01 / 2007 Transaction ID: 70719.C31766 Amount of Each Receipt this Period 403.86 Receipt Payroll Deduction: (134.6- 2/Pay Period)
B. Full Name (Last, First, Middle Initial) Vernon Williams Mailing Address 1601 Wyndham Court City State Zip Code Santa Ana CA 92705 FEC ID number of contributing federal political committee. C Name of Employer Baxter Healthcare Corporation Occupation VP, Baxter IT Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 650.00		Date of Receipt MM / DD / YYYY 06 / 01 / 2007 Transaction ID: 70719.C31757 Amount of Each Receipt this Period 150.00 Receipt Payroll Deduction: (50.00- /Pay Period)
C. Full Name (Last, First, Middle Initial) Subramania Yogendran Mailing Address S Yogendran PO Box 747 City State Zip Code Deerfield IL 60015 FEC ID number of contributing federal political committee. C Name of Employer Baxter World Trade Corporation Occupation VP II, Finance Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 522.96		Date of Receipt MM / DD / YYYY 06 / 01 / 2007 Transaction ID: 70719.C31786 Amount of Each Receipt this Period 122.76 Receipt Payroll Deduction: (40.92- /Pay Period)

SUBTOTAL of Receipts This Page (optional)

676.62

TOTAL This Period (last page this line number only)

12015.32

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

Baxter Healthcare Political Action Committee

Full Name (Last, First, Middle Initial)

A. Friends of Max Baucus

Mailing Address 818 Connecticut Avenue, NW
Suite 1100

City Washington State DC Zip Code 20006-

Purpose of Disbursement

Candidate Name
MAX BAUCUS

Category/
Type

Office Sought: ☐ House
☒ Senate
☐ President

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

State: MT District: 00

Transaction ID: 70719.E779

Date of Disbursement

06 / 25 / 2007

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

B. Melissa Bean for Congress

Mailing Address P. O. Box 3068

City Barrington State IL Zip Code 60011-

Purpose of Disbursement

Candidate Name
MELISSA LUBURICH BEAN

Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

State: IL District: 08

Transaction ID: 70719.E789

Date of Disbursement

06 / 25 / 2007

Amount of Each Disbursement this Period

1500.00

Full Name (Last, First, Middle Initial)

C. Brian Bilbray for Congress

Mailing Address PO Box 455

City Rancho Santa Fe State CA Zip Code 92067-0455

Purpose of Disbursement

Candidate Name
BRIAN PHILLIP BILBRAY

Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

State: CA District: 49

Transaction ID: 70719.E781

Date of Disbursement

06 / 25 / 2007

Amount of Each Disbursement this Period

1000.00

SUBTOTAL of Disbursements This Page (optional)

3500.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

Baxter Healthcare Political Action Committee

Full Name (Last, First, Middle Initial)

A. Friends of Dick Durbin Committee

Mailing Address PO Box 1949

City
Springfield

State
IL

Zip Code
62705-1949

Purpose of Disbursement

Candidate Name
RICHARD J DURBIN

Category/
Type

Office Sought: ☐ House
☒ Senate
☐ President

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

State: IL District: 00

Transaction ID: 70719.E778

Date of Disbursement

/ /

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

B. Enzi for U.S. Senate

Mailing Address PO Box 2775

City
Cody

State
WY

Zip Code
82414-2775

Purpose of Disbursement

Candidate Name
MICHAEL B ENZI

Category/
Type

Office Sought: ☐ House
☒ Senate
☐ President

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

State: WY District: 00

Transaction ID: 70719.E786

Date of Disbursement

/ /

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

C. Ferguson for Congress

Mailing Address PO Box 4205

City
Warren

State
NJ

Zip Code
07059-0205

Purpose of Disbursement

Candidate Name
MIKE FERGUSON

Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

State: NJ District: 07

Transaction ID: 70719.E782

Date of Disbursement

/ /

Amount of Each Disbursement this Period

1000.00

SUBTOTAL of Disbursements This Page (optional)

3000.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

Baxter Healthcare Political Action Committee

Full Name (Last, First, Middle Initial)

A. Hoyer for Congress

Mailing Address 7905 Malcolm Road
Suite 102

City Greenbelt State MD Zip Code 20770-7212

Purpose of Disbursement

Candidate Name
STENY HAMILTON HOYER

Office Sought: ☒ House
☐ Senate
☐ President

State: MD District: 05

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

Category/
Type

Transaction ID: 70719.E785

Date of Disbursement

06 / 25 / 2007

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

B. Kirk for Congress

Mailing Address 28 Green Bay Rd

City Winnetka State IL Zip Code 60093-4006

Purpose of Disbursement

Candidate Name
MARK STEVEN KIRK

Office Sought: ☒ House
☐ Senate
☐ President

State: IL District: 10

Disbursement For: 2008
☐ Primary ☒ General
☐ Other (specify) ▼

Category/
Type

Transaction ID: 70719.E788

Date of Disbursement

06 / 25 / 2007

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

C. Kirk for Congress

Mailing Address 28 Green Bay Rd

City Winnetka State IL Zip Code 60093-4006

Purpose of Disbursement

Candidate Name
MARK STEVEN KIRK

Office Sought: ☒ House
☐ Senate
☐ President

State: IL District: 10

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

Category/
Type

Transaction ID: 70719.E787

Date of Disbursement

06 / 25 / 2007

Amount of Each Disbursement this Period

3000.00

SUBTOTAL of Disbursements This Page (optional)

10500.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Baxter Healthcare Political Action Committee

Full Name (Last, First, Middle Initial)

A. Citizens to Elect Rick Larsen

Mailing Address PO Box 326

City
Everett

State
WA

Zip Code
98206-0326

Purpose of Disbursement

Candidate Name
RICK R LARSEN

Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

State: WA District: 2

Transaction ID: 70719.E783

Date of Disbursement

/ /

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

B. Earl Pomeroy

Mailing Address PO Box 75214

City
Washington

State
DC

Zip Code
20013-

Purpose of Disbursement

Candidate Name
EARL RALPH POMEROY

Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

State: ND District: 00

Transaction ID: 70719.E780

Date of Disbursement

/ /

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

C. Ryan for Congress

Mailing Address PO Box 1919

City
Janesville

State
WI

Zip Code
53547-1919

Purpose of Disbursement

Candidate Name
PAUL D RYAN

Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

State: WI District: 01

Transaction ID: 70719.E784

Date of Disbursement

/ /

Amount of Each Disbursement this Period

1000.00

SUBTOTAL of Disbursements This Page (optional)

3000.00

TOTAL This Period (last page this line number only)

20000.00